

# Inside **OUT**

The Newsletter of the CDC/HRSA Corrections Demonstration Projects

Produced four times a year through the collaboration of the

Correctional Technical Assistance and Training Project of SEATEC and the National Minority AIDS Council

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## CDC/HRSA 6<sup>th</sup> Semi-Annual Grantee Meeting to Be Held in New York City in August

The Evaluation and Program Support Center (EPSC) will convene the sixth semi-annual meeting of the state grantees for the CDC/HRSA Corrections Demonstration Project on August 13-14, 2002, in New York City. We anticipate this will be a highly productive meeting in which grantees, the EPSC, CDC and HRSA will discuss issues pertinent to the implementation of program and evaluation activities.

On the heels of the National CBO Meeting in Ft. Lauderdale, the Grantee Meeting will provide a necessary forum for discussion of the direction and goals of specific workgroups and of the Corrections Project as a whole. Agenda topics include a panel on Public Health and Corrections, along with a roundtable with Dr. Hugh Potter of the CDC on securing future project funding. In addition, time has been allocated for Jail, Prison, Juvenile, CBO,

Policy, and Publication & Dissemination workgroup meetings.



Maritza Feliciano, Carmen Centeno-Wey and Everett Hardy at the February Grantee meeting.

State grantees have the opportunity to prepare poster presentations about their specific projects that will remain on display for the duration of the meeting. An optional site visit to Rikers Island Correctional Facility on the afternoon of August 12 precedes the meeting's will official commencement on the morning of August 13.

Registration for the meeting must be received no later than July 24, 2002. If you would like more information about the August Grantee Meeting of the CDC/HRSA Corrections Demonstration Project, please contact Keisha Cooper of Emory University at (404) 727-7895. ❖



Jeffery Brock, Dr. Jeff Porterfield, Keisha Copper and Dr. Kimberly Jacobs Arriola were among the attendees at the Fifth Semi-Annual Grantee Meeting in Atlantic City

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# Inside OUT Spotlight

## Richard Moore

### *Deputy Branch Chief, Demonstration Project Development and Evaluation Branch, HRSA*

**R**ichard Moore is deputy branch chief of the Demonstration Project Development and Evaluation Branch, (where the Special Projects of National Significance is administered), in the Office of Science and Epidemiology, HIV/AIDS Bureau, Health Resources and Services Administration (HRSA). The following are highlights of an interview conducted on April 10, 2002.

A graduate of Delaware State University with degrees in accounting and business, Moore has spent most of the past 18 years working in administrative positions in the Department of Health and Human Services. His experience and exposure to a variety of staffing positions has prepared him well for his transition into a more mission-driven program role.

“Before I started working in the HIV/AIDS Bureau, I provided accounting and financial services support to HRSA’s various grant programs. But I wanted to become more directly involved in HRSA’s mission of expanding access to quality health care for all Americans. I was fortunate to get an opportunity to come to the HIV/AIDS Bureau and work with a team of dedicated people to advance knowledge and skills in the delivery of health and support services to underserved populations diagnosed with HIV infection.”

Moore’s interest in public service began in childhood. The second in a family of five boys and three girls, he was raised in eastern North Carolina. You can hear a smile in his voice, when he mentions his family, explains that they were teachers and expresses his childhood assumption that he would also become a teacher. However, the political and social environment of the 1960s and ‘70s would change his career course.

“Changes that came about from the social activism of the ‘70s influenced my thinking about how regular people make a positive difference in the lives of others,” explains Moore.

Today, in his role as a public health analyst administering the Special Projects of National Significance, Moore’s social ac-

tivism takes the form of helping to change the health status of thousands of people with HIV and AIDS.

“[HRSA’s HIV/AIDS Bureau] has an expansive impact. We have the capacity to improve health care delivery to people across the nation,” he said.



When asked about the significance of the work on the Corrections Demonstration Project, Moore replies, “[These demonstration projects] give HRSA an opportunity to support and evaluate models that promote continuity of care for incarcerated individuals with HIV, STDs, TB, substance abuse and hepatitis as they transition back to the community.”

He explained that HRSA’s involvement is critical because many ex-offenders end up becoming clients served under the Ryan White CARE Act due to disparities and barriers encountered by HIV positive ex-offenders when they transition from correctional facilities back into the community.

Moore is a strong proponent of collaboration between correctional health and public health to improve access to healthcare and decrease recidivism rates for HIV positive ex-offenders.

“We must encourage and assist in the development of replicable models of prison and jail discharge planning that offer critical opportunities to provide life-saving HIV/AIDS services to a population that might otherwise be missed. We can improve the quality of care for HIV positive incarcerated individuals by improving relationships between correctional health and public health,” he said.

No doubt, Richard Moore would have been a great school-teacher and influenced perhaps thousands of students over his career. However, the passion and motivation Richard brings to the national arena will inevitably change the sociopolitical landscape of HIV/AIDS policymaking and subsequently, the lives of hundreds of thousands of people for years to come.

# Tarzana Treatment Center: 30 Years of Providing Care

by Linda Levinson, CTAT, based on an interview with Sheri Lin

Tarzana Treatment Center was founded in 1972 to provide drug treatment services in Los Angeles County. Thirty years later, Tarzana has expanded to five sites in the Los Angeles area that collectively serve tens of thousands of patients every year. Tarzana is a large health care organization providing a full range of integrated health care services, including services for people incarcerated at the Los Angeles County Jail and California State Prisons who are paroling to the Los Angeles Area. Tarzana is one of three agencies providing case management services for the Corrections Demonstration Project in the Los Angeles area.



Tarzana Treatment Center programs include:

- ◆ Outpatient Primary Medical Care
- ◆ Inpatient Medical Detoxification Programs
- ◆ Residential Drug Treatment
- ◆ Community Case Management Beyond Drug Treatment
- ◆ “Sober Living” Supportive Housing
- ◆ Court-Referred Drug Diversion
- ◆ Court-Referred Domestic Violence and Anger Management Education
- ◆ Short-Term Emergency Mental Health Treatment On-Site in Transitional Housing
- ◆ Housing for Previously Incarcerated, HIV-Positive and Chemically-Dependent Persons
- ◆ HOPWA Emergency Housing and Food
- ◆ Vocational and Life-Skills Training
- ◆ Education and Prevention Services, Including Peer-Facilitated Support for HIV-Positive Substance Users in Recovery

All facilities are licensed and certified by the State of California and the County of Los Angeles and are accredited by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

The Transitional Case Management Program began 11 years ago at the California Institution for Men in Chino. The program was founded to address high recidivism rates among former inmates living with HIV/AIDS. Following a successful pilot program, a larger Transitional Case Management program was launched in 1993.

Since 1993, the program has expanded to include many institutions and nine teams of employees who share information and work together to provide comprehensive service plans to inmates, starting before release. Transitional Case Management services are currently provided at many men’s and women’s California state prisons, including those in San Luis Obispo, Chowchilla, Vacaville, Chino, Frontera, Corcoran, Wasco, and others. Tarzana’s eight Transitional Case Management employees focus on two institutions in Los Angeles County: the Los Angeles County Jail and the State Prison in Lancaster.

An initial interview and in-depth psychosocial assessment is done with each inmate 90 days prior to his or her release. Sixty days before release, the service team and inmate formalize the release plan. The plan is then finalized 30 days before release. The inmate’s final service plan is detailed and precise. It assures that the inmate knows what to do when he or she walks out the door of the correctional facility. One of the critical lessons to learn in transitional case management is that transportation is an absolutely central issue for successful discharge planning. Using state-provided cars, Tarzana case managers pick up inmates when they are released and transport them to their parole agent and then to their pre-arranged housing.

The issue of inmate turnover significantly affects Tarzana’s Los Angeles County Jail program. Inmates are seldom informed of release dates in advance, making it more difficult to design and implement a workable service plan. In addition, short stays in jail mean that inmates can usually return to their pre-jail support system and ignore the case management plan. As a further challenge, L.A. Jail sometimes releases inmates during the middle of the night. Tarzana Transitional Case Management staffers continue to work with the jail to establish set release dates and times, particularly for HIV positive inmates who must quickly connect to the appropriate community services.

For further information about Tarzana Treatment Centers, please write or call: Tarzana Treatment Centers, 7101 Baird Avenue, Reseda, CA 91335, (818) 342-5897. Learn more about the mission and services of Tarzana Treatment Centers online at <http://www.tarzanatc.org>. ❖

# New Resources

## **Major New Recidivism Study Published**

Justice Department researchers have reported their findings in the largest recidivism study ever conducted in the United States. The three-year study tracked rearrest and re-incarceration rates among more than 250,000 state prisoners released in 1994.

The results paint a clear picture of the challenges facing this population: within three years of release, 67% of former prisoners in the study had been rearrested, and 52% were back in prison.

Case managers and transitional/discharge planners know that the issue of recidivism looms large in their work. The primary purpose of the CDC/HRSA Corrections Demonstration Project is to “expand and enhance HIV-related services to inmates ... especially to those in the process of preparing for release or recently released.” One of the questions that Demonstration Project evaluators will ask when assessing its outcomes is whether case management and prevention interventions have reduced recidivism.

The new Justice Department study did not detail recidivism rates specifically among former prisoners living with HIV/AIDS. However, the overall results are stark: the re-arrest rate was 5% higher than the previous large study of recidivism, done on prisoners released in 1983.

African American former prisoners were more likely than white former prisoners to be rearrested (73% versus 63%), reconvicted (51% versus 43%), and returned to prison (54% versus 50%). Age was also correlated with recidivism: over 80% of former prisoners released when they were under age 18 were re-arrested, compared to 45% of those aged 45 or older.

The 272,211 former prisoners tracked in the study were released from 15 states, including five of the seven states in the Demonstration Project (California, Florida, Illinois, New Jersey, New York). The study population represented two thirds of all state prisoners released in 1994.

The complete report is available online at [www.ojp.usdoj.gov/bjs/abstract/rpr94.htm](http://www.ojp.usdoj.gov/bjs/abstract/rpr94.htm) ❖

## **Email Listserv on HIV And HEP C in Prisons and Jails**

PrisonPoz is an email listserv focusing on HIV and Hepatitis C in prisons and jails. More than 120 subscribers from across the country — service providers, activists, ex-prisoners, academics — use the listserv to share information and announcements in the field. Subscription is free! Email list owner, Rachel Maddow, at [maddow@rcn.com](mailto:maddow@rcn.com) for further information or to subscribe.

## **Email Listserv For The Care Act Community**

HRSA HIV/AIDS Bureau’s (HAB) “HAB Information E-mail” provides updates to HRSA/HAB grantees and others in the CARE Act community. The bi-weekly newsletter includes funding alerts, HAB policy updates, conference announcements, and resources. To subscribe, contact Paula Jones at [pjones1@hrsa.gov](mailto:pjones1@hrsa.gov).

## **NMAC Publications**

### **First Steps - Understanding the Culture of Corrections**

Published in 2000, this booklet offers an introduction to the “culture of corrections” and is designed to help CBOs learn how to work effectively within correctional facilities.

### **Hitting the Bricks - The First 72 Hours**

Published in 2002, this booklet discusses issues facing former prisoners immediately upon their release. It aims to familiarize CBO staff with some of the services that can facilitate a successful transition from incarceration back to the community.

### **July/August HIV Education Resource List for Corrections**

This regularly updated publication provides a list of educational resources for the correctional setting, as well as general HIV/AIDS and HCV information that can be accessed by incarcerated individuals directly and/or by CBOs advocating on their behalf. The resource list can be viewed online at [www.nmac.org/treatment](http://www.nmac.org/treatment).

Copies can also be obtained by emailing [dclark@nmac.org](mailto:dclark@nmac.org) or writing Dwight Clark at the National Minority AIDS Council, 1931 13th Street NW, Washington, DC, 20009. ❖

## Highlights:

### *CBO Meeting, Fort Lauderdale, June 2002*

The National CBO Meeting for the CDC/HRSA Corrections Demonstration Project took place June 4-5 in Fort Lauderdale, Florida. More than 140 participants represented 50 community-based organizations (CBOs), the Centers for Disease Control and Prevention, the Health Resources Services Administration, Emory University, Abt Associates, and two pharmaceutical companies.

Two days of meetings provided opportunities for participation in six roundtable discussions, six workshop presentations, and three plenary sessions, all related to the design and provision of successful discharge and transitional planning services.

Workshops included HIV, Incarceration and Mental Health; HIV/HCV Co-Infection; Special Populations: Women and Juveniles; Peer Education in the Correctional Setting; Risk Reduction; and Substance Abuse Treatment. Roundtables included Housing & Employment of the Ex-Offender HIV-Positive Population; Relationship Building with Corrections (2 sessions); Tracking and Retention of HIV+ Clients; Treatment Adherence; and Overcoming Barriers in the Community.

Roundtables and workshop presentations afforded an opportunity for participants to gain additional knowledge about these issues, as well as to voice their own concerns and dialogue with colleagues engaged in similar work.



*CBO Meeting Attendees:  
Johnetta Holcombe,  
Odetta Dodson and  
Jason Stanford*

As part of NMAC's ongoing technical assistance for CBOs in the Demonstration Project, the issues of mental health, HIV/HCV co-infection, and the special populations of women and juveniles will each be addressed in forthcoming NMAC informational booklets. A state-by-state training is currently addressing the issues of housing and employment for recently released offenders (see page 6 for more information). ❖

## Workgroups

Demonstration Project workgroups convened during the February 2002 Grantee Meeting in Atlantic City. These summaries provide a quick review of the primary issues being addressed in each group:

The **Jail Workgroup** was established to address issues affecting Demonstration Project grantees working in city and county jails. After identifying the need for these service providers to have access to a shared resource manual, the workgroup developed a Service Directory. The Directory has been distributed to all jails participating in the Demonstration Project and has been well received. Riding on the success of this first initiative, the workgroup decided to expand the Directory to include organizations not participating in the Demonstration Project. Workgroup members also decided to develop a peer-to-peer technical assistance initiative to better serve their colleagues.

Stacy Shank was appointed the new chair of the **Prison Workgroup**, succeeding Mick Gardner. Stacy and the workgroup have focused their energies on developing a Prison Resource Guide and forming viable collaborations with corrections agencies in each grantee state. In addition, the group has chosen to continue encouraging its members to prepare site reports in order to share strategies for trouble-shooting among the grantees. Ultimately the group hopes publish a compilation of "Best Practices" material.

The **CBO Workgroup** was established in November 2001 to provide an open forum for frontline staff to discuss barriers to implementing comprehensive HIV education, counseling, prevention, and transitional planning services in prisons and jails. The CBO workgroup is also responsible for the incorporation of client-level experiences in the Annual Report for the Demonstration Project. Currently the workgroup is constructing a CBO Directory, which will describe all of the community-based organizations working on the Demonstration Project, the communities where they are located, and the services they provide. The CBO Workgroup meets once a month (usually by conference call) and is chaired by Dwight Clark of the National Minority AIDS Council's Prison Initiative. ❖



# National Minority AIDS Council Prison Initiative

The Prison Initiative at the National Minority AIDS Council (NMAC) provides technical assistance to community based organizations (CBOs) participating in the CDC/HRSA Corrections Demonstration Project. In needs assessments conducted by NMAC, the CBOs expressed a need for educational resources specifically pertaining to corrections and discharge planning. In addition, CBOs requested technical assistance on developing and locating housing solutions for former prisoners living with HIV/AIDS.

In response, NMAC developed a new housing curriculum specifically targeting CBOs participating in the Demonstration Projects. The training will be facilitated in each of the seven participating states over a four-month period. In addition, NMAC has begun publishing a series of informational booklets on corrections and discharge planning.

## *Housing Training*

The new housing training curriculum is designed to help CBOs identify and explore alternatives to traditional post-incarceration housing options for ex-offenders. Specifically, participants are encouraged to identify organizations and agencies providing housing for mentally ill individuals and those with a history of substance abuse (active or in recovery). The training also seeks to promote cooperation and linkage agreements between transitional planners and grantees of the HOPWA program (Housing Opportunities for People with AIDS) or privately-subsidized housing organizations.

The one-day training is divided into a morning and afternoon session, both facilitated by a housing specialist from the training region.

In the morning session, participants identify housing resources and collaborations that already exist in their region, then outline tools and procedures case-managers currently utilize to link their clients with short-term and permanent housing. The session also provides an opportunity for participants to discuss the challenges and barriers ex-prisoners face when trying to obtain housing and supportive services. Emphasis is placed on finding ways to decrease the stigmatization of ex-prisoners.

The afternoon session includes a panel/forum with invited guests including HOPWA grantees, Department of Health staff, and Community Planning Group (CPG) representatives.

The panel/forum is designed to foster dialogue about the feasibility of creating new housing options for ex-prisoners.

A preliminary version of this training was piloted on May 15, 2002, at Exponents, Inc. in New York City. Participants included case-managers and transitional planners from Demonstration Project CBOs including the Osborne Association, Women's Prison Association and Home, Inc., Exponents Inc, the Center for Community Alternatives, and Project Return/Women in Crisis. Steve Nesselroth facilitated the training, briefing participants on recent changes to federally-subsidized HIV/AIDS emergency stipends, local political advocates for post-release services, and current trends in supportive housing development. Participants in the morning session succeeded in identifying four centrally located housing agencies that had not yet been approached to serve the ex-prisoner population.

After breaking for lunch, panelists Andrea White (Center for Urban Community Services – CUCS), Katherine Leptokaropoulos (Fortune Society), and Joshua Sippen (From Our Streets with Dignity – FROST'D) facilitated a discussion exploring inter-agency collaboration.

The pilot training and the first few subsequent trainings have been very successful, and NMAC looks forward to bringing them to each of the seven states in the next few months.

## *Informational Booklets*

*First Steps – Understanding the Culture of Corrections*, published in 2000, offers an introduction to the “culture of corrections” and is designed to assist CBOs in learning to work successfully in correctional facilities.

*Hitting the Bricks: Working with Recently Released Former Prisoners Living with HIV/AIDS*, published in 2002, outlines the services needed in the first 72 hours after someone living with HIV/AIDS is released from prison or jail.

It is anticipated that four more booklets will be published in NMAC's correctional booklet series within the year. Anticipated topics are mental health and substance abuse; HIV/HCV co-infection; women; and juveniles.

In addition, NMAC maintains an *HIV Education Resource List for Corrections* which includes the most up-to-date information on education and training resources for prisoners living with HIV/AIDS and the service providers who work with them.

Both the Resource List and the informational booklets can be found on NMAC's website at [www.nmac.org/treatment/prison\\_initiative.htm](http://www.nmac.org/treatment/prison_initiative.htm). If you have questions about these or other NMAC Prison Initiative projects, please contact Dwight Clark or Michaela Leslie-Rule at (202) 483-6622. ❖

# Comprehensive HIV Education and Prevention for Incarcerated Youth

by Linda Levinson  
*Correctional Technical Assistance and Training Project*  
with information provided by  
Melinda M. Ferguson, MPH  
*National Commission on Correctional Health Care*

The Comprehensive HIV Education and Prevention for Incarcerated Youth Program is an intensive two-day training provided free-of-charge to service providers working with incarcerated youth. The program provides comprehensive HIV education and prevention training appropriate for service providers in a variety of youth confinement facilities – including boot camps, training schools, and group homes.

The program is a result of collaboration between the National Commission on Correctional Health Care (NCCHC) and the Centers for Disease Control and Prevention, Division of Adolescent and School Health.

Service providers working in juvenile justice facilities know that the term “high risk youth” is more than just a buzzword. It conveys a complex set of interrelated issues that make working with this population uniquely challenging and – at times – uniquely rewarding.

In order to address the myriad issues putting incarcerated youth at high risk for HIV infection, the National Institute for Drug Abuse designed the Comprehensive HIV Education and Prevention for Incarcerated Youth Program. The training curriculum’s topics include:

- ◆ Up-to-date information on HIV and AIDS
- ◆ HIV treatment and testing
- ◆ HIV counseling techniques
- ◆ How to develop and start a peer-to-peer education program in a correctional setting

- ◆ Adolescent alcohol and drug use
- ◆ Adolescent concerns regarding sexuality and risk-taking behaviors
- ◆ Methods for conducting effective adolescent risk awareness and risk reduction assessments

The trainings are intended to provide practical and population-specific advice and support for professionals in this field. Target participants include counselors, nurses, educators, case workers, child care workers, psychologists, and physicians. By the end of the training, it is expected that participants could develop and implement a new HIV education program in a juvenile confinement facility or enhance an existing program.

Because this training is the first national effort of its kind, it aims not only to build up skills in individual service providers, but also to build relationships and networks among the growing number of professionals working in this important field. The training is a forum that allows participants the opportunity to share ideas and discuss “best practices.” It allows participants to network with professionals involved in the juvenile justice system and social services, and it aims to reinforce participants’ motivation and commitment as workers on the “front line” of the HIV/AIDS epidemic. Importantly, the training also helps participants identify and discuss *barriers* that can interfere with service providers’ commitment to this challenging work.

NCCHC collaborates with local, regional and state co-sponsors to ensure that these trainings are made available to their intended audience. Regional co-sponsors help choose sites for the trainings, identify and select appropriate participants from each region, and compile a list of local resources on HIV/AIDS, STDs, and alcohol and drug services. Training materials, including a comprehensive training manual, are provided free of charge to all participants.

NCCHC uses a number of evaluation methods to ensure that the program is meeting its intended goals and objectives. Each participant completes a training evaluation and rates all areas of the training. Participants are also asked to complete knowledge and attitude-based pre- and post-test questionnaires. Finally, participants complete a baseline HIV education survey, followed by, three, six, and twelve month follow-up surveys.

For further information about this program and others targeting incarcerated youth, write or call: The National Commission on Correctional Health Care, 1300 West Belmont Avenue, Chicago, IL 60657-3240, (773) 880-1460. ❖

• *Centerforce Summit 2002* •

**Inside-Out:  
Fostering Healthy Outcomes  
for the Incarcerated and Their Families**

• **October 7-9, 2002** •  
**Shelter Pointe Hotel and Marina**  
**San Diego, CA**



*The Centerforce Summit will foster discussions between consumers, corrections, public health and service providers about best practices of prevention and transitional care for individuals and their families prior to and upon release from custody.*

**Featured Tracks**

*Current Trends and Critical Issues  
Family and Children's Services  
Transitional Services  
Prevention and Education  
Clinical/Mental Health*

For more information about program content, contact Stacey Shank at (559) 241-6162 or e-mail [sshank@centerforce.org](mailto:sshank@centerforce.org).

To be placed on the mailing list for registration materials, contact RDL enterprises at 916-443-0218 or e-mail [Karl@RDLEnt.com](mailto:Karl@RDLEnt.com).

**Recap:**

**February 2002 Grantee Meeting**

The 5<sup>th</sup> Semi-Annual Grantee Meeting of the CDC/HRSA Corrections Demonstration Project convened February 4, 2002. The New Jersey hosts provided an enjoyable setting with entertaining and useful activities.

Some participants took part in a site visit to the Institute for Human Development, where the agency provided speakers and tours of the facility, while explaining the diverse services it offers to its clients.

Two sessions exposed participants to compelling insights into offender experiences, challenges, and creative solutions. In one, a panel of ex-offenders described the importance of the services and community links provided by the New Jersey project. In the other, Jeremy Travis, of the Urban Institute and the Justice Policy Center presented his booklet: *From Prison to Home – The Dimensions and Consequences of Prisoner Reentry*.

Each workgroup (Prisons, Jails, CBOs) met over a roundtable lunch, and a new workgroup was established, "HIV Corrections Best Practices." A report on workgroup progress is presented on page 5.

*Save the Date  
Save the Date  
Save the Date*

August 3-8  
American Correctional Association, Summer Conference  
Anaheim, CA  
[jeffw@aca.org](mailto:jeffw@aca.org)  
[www.corrections.com/aca](http://www.corrections.com/aca)

August 12-16  
National Minority AIDS Council's Regional Training: "The Challenge of HIV/AIDS: Confronting Oppression"  
Minneapolis, MN  
Faisal Alam 202-483-6622 or [falam@nmac.org](mailto:falam@nmac.org)  
[www.nmac.org/conference/regionals/minneapolis/welcome.htm](http://www.nmac.org/conference/regionals/minneapolis/welcome.htm)

August 16-17  
National Association of People with AIDS Staying Alive Conference: "Rising Above"  
Philadelphia, PA  
Charles Debnam 202-898-0414 or [cdebnam@napwa.org](mailto:cdebnam@napwa.org)  
[www.napwa.org](http://www.napwa.org)

August 20-23  
Ryan White CARE Act 2002 Grantee Conference  
Washington, DC  
<http://www.psava.com/rwca2002.htm>

September 8-12  
2002 Annual National Conference on Addiction & Criminal Behavior  
St. Louis, MO  
Phone GWC at 800-851-5406  
[www.gwcinc.com/ncacbmainpg.htm](http://www.gwcinc.com/ncacbmainpg.htm)

September 10-13  
Association of State and Territorial Health Officials (ASTHO) 2002 Annual Meeting: "Public Health: The Challenge Continues"  
Nashville, Tennessee  
Phone 202-371-9090 or e-mail [kkrolak@astho.org](mailto:kkrolak@astho.org)  
[www.astho.org/annual.html](http://www.astho.org/annual.html)

September 11-14  
Congressional Black Caucus 2002 Annual Legislative Conference  
Washington, DC  
Phone: 1-800-784-2577  
[www.cbconline.org](http://www.cbconline.org)

September 19-22  
United States Conference on AIDS  
Anaheim, CA  
[www.nmac.org/usca2002](http://www.nmac.org/usca2002)

September 20-21  
Conference of the University of Virginia Center for Improving Minority Health: "Overcoming Barriers to Improving Health Disparities: Policy, Practice, Research"  
Charlottesville, VA  
Phone 434-982-4153 or email: [acs4n@virginia.edu](mailto:acs4n@virginia.edu)  
[www.hsc.virginia.edu/cimh](http://www.hsc.virginia.edu/cimh)

*Aztec calendar stone*